

STATE OF SOUTH CAROLINA

(Caption of Case)

Example: Application for a Class C Charter Certificate from
John Doe dba Doe's Limo

Application for a Class C
Charter Certificate from Luke
H. Stapleton dba ~~the~~ Duke's
Town Car Service LLC

BEFORE THE
PUBLIC SERVICE COMMISSION
OF SOUTH CAROLINA

TRANSPORTATION COVER SHEET

DOCKET

NUMBER: 2010 - 65 - 1

If this is your first time filing an application with the PSC, you will not have a Docket Number. The Commission will assign one to you. If you have filed with the Commission before, a Docket Number was assigned and should be entered above.

(Please type or print)

Submitted by: Luke H StapletonTelephone: 843 785-3893Address: 63 Shipyard Drive # 403

Fax: _____

Hilton Head SC 29928Other: Cell Phone 843 422-0722Email: B2STAP403 @ AOL

NOTE: The cover sheet and information contained herein neither replaces nor supplements the filing and service of pleadings or other papers as required by law. This form is required for use by the Public Service Commission of South Carolina for the purpose of docketing and must be filled out completely.

NATURE OF ACTION (Check all that apply)

- ☐ Application - Class A/A Restricted
- ☒ ~~Application~~ - Class C Taxi
- ☒ Application - Class C Charter
- ☐ Application - Class C Charter Bus
- ☐ Application - Class C Non-Emergency
- ☐ Application - Class C Stretcher Van
- ☐ Application - Class E Household Goods
- ☐ Application - Class E Hazardous Waste
- ☐ Application
- ☐ Request for Extension to Comply with Order
- ☐ Request for Order Granting Authority to Obtain a Certificate of Public Convenience and Necessity to be Rescinded
- ☐ Request for Cancellation of Certificate
- ☐ Request for Suspension
- ☐ Request for Reinstatement
- ☐ Request for Name Change on Certificate
- ☐ Request to Amend Scope of Authority
- ☐ Request to Amend Tariff (rate increase, etc.)
- ☐ Request to Amend Passenger Limit
- ☐ Request
- ☐ Exhibit
- ☐ Late-Filed Exhibit
- ☐ Letter
- ☐ Proposed Order
- ☐ Publisher's Affidavit
- ☐ Reservation Letter
- ☐ Response
- ☐ Return to Petition
- ☒ Other: Please consider
expeditiously

If you have any questions about this form, please contact the PUBLIC SERVICE COMMISSION at 803-896-5100.

225

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA
 101 Executive Center Drive, Suite 100
 Columbia, South Carolina 29210
 (Mailing address: Post Office Drawer 11649, Columbia, SC 29211)

Phone: (803) 896-5100 Fax: (803) 896-5199

APPLICATION FOR CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY FOR
 OPERATION OF MOTOR VEHICLE CARRIER

RECEIVED

Date: 1/25/10

CLASS C - CHARTER

FEB 16 2010

PSC SC
 CLERK'S OFFICE

Application is hereby made for a Certificate of Public Convenience and Necessity, in accordance with the provision of S.C. Code Ann., § 58-23-10, et seq. (1976), and amendments thereto.

1. Name under which business is to be conducted (corporation, partnership, or sole proprietorship, with or without trade name.)

AS Duke's Town Car Service LLC

63 Shipyard Drive #403

Street Address of Applicant

Hilton Head SC 29928

Mailing Address of Applicant if different from street address

843 785 3893

Phone

Cell 843 422 0722

843 842 5872 c105CBZ

Fax

BLSTAP403 @ AOL

Email Address

2. If incorporated, a copy of Articles of Incorporation must be attached. (If incorporated outside of SC, attach SC Secretary of State "Foreign Corporation" Certificate.)

3. Select Entity Type: (Check one)

☐ Individual Owner/Sole Proprietorship

☐ Partnership - List names and address of all person having an interest in the business.

☒ Corporation - List names and addresses of two principal officers.

Luke H Stapleton

63 Shipyard Drive # 403

Barbara E Stapleton

63 Shipyard Drive # 403

Hilton Head SC 29928

The State of South Carolina



Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby certify that:

DUKE'S TOWN CAR SERVICE, LLC, A Limited Liability Company duly organized under the laws of the State of South Carolina on March 1st, 2010, with a duration that is at will, has as of this date filed all reports due this office, including its most recent annual report as required by section 33-44-211, paid all fees, taxes and penalties owed to the Secretary of State, that the Secretary of State has not mailed notice to the company that it is subject to being dissolved by administrative action pursuant to section 33-44-809 of the South Carolina Code, and that the company has not filed a certificate of cancellation as of the date hereof.

Given under my Hand and the Great Seal of the
State of South Carolina this 7th day of January,
2010

A handwritten signature of Mark Hammond in black ink.

Mark Hammond, Secretary of State

Applicant is financially able to furnish the services as specified in this application and submits the following statement of assets and liabilities.

BALANCE SHEET

Balance at Time Application is Filed:

Month Dec Year 2009

Assets:

| | |
|---------------------------------------|--------------|
| Cash | |
| Receivables | |
| Real Estate | |
| Buildings and Equipment (Net) | 42249 |
| Motor Vehicles (Net) | |
| Garage Equipment (Net) | |
| Machinery and Tools (Net) | |
| Supplies on Hand | |
| Prepays and Other Assets | |
| Total Assets | 42249 |
| | |
| <u>Liabilities and Equity:</u> | |
| Accounts Payable | |
| Notes Payable | |
| Mortgages Payable | |
| Equipment Obligations | |
| Accrued Salaries and Wages | |
| Other Accrued Obligations | |
| Other Liabilities | |
| Total Liabilities | |
| | |
| Capital Stock | 42249 |
| Retained Earnings | |
| Total Equity | 42249 |
| Total Liabilities and Equity | 42249 |

PROPOSED RATES AND CHARGES FOR SERVICE

Maximum Proposed Rates and Charges for Service are as follows:

Per Hour Basis ~~\$25~~ - \$500 Per Hour Dependent
on Nature of Service is maximum proposed rate

Counties to be Served:

Beaufort, Jasper Counties
Culliton Hampton

Maximum Number of Passengers per Vehicle:

6 4 Adults, 2 children

DESCRIPTION OF EQUIPMENT

[illegible]

01/27/2010 13:19
01/25/2010 MON 16:23 FAX

(FAX)

P.002/002
002/002

INSURANCE QUOTE

This form **MUST BE COMPLETED AND SIGNED** by an **AUTHORIZED INSURANCE COMPANY REPRESENTATIVE**.

The following insurance quote is for:

AKS Duke's Towncar Service LLC
 Name of Motor Carrier
63 Shipyard Dr #403 Hilton Head SC 29928
 Address of Motor Carrier

Amount of Premium:Limits Quoted: (See Below)

Liability Insurance \$ 3581 Limits 1,000,000
um 1,000,000

The above quoted premium is for a term of 12 months.Minimum Limits - Intrastate Only:

| | |
|-----------------|--------------------------|
| 1-7 Passengers | \$ 25,000/50,000/25,000 |
| 8-15 Passengers | \$ 25,000/100,000/25,000 |

Cornhusker Casualty Company
 Name of Insurance Company
A Birkshire Hathaway company

1725 Windward Con Course Ste 200 Alpharetta, GA
 Home Office Address of Company
30005

I am familiar with the Commission's Rules and Regulations relating to insurance requirements and the above quote meets the minimum insurance limits prescribed. The insurance company making this quote is authorized by the South Carolina Department of Insurance to do business in South Carolina.

1/27/10
 Date

[Signature]
 Authorized Insurance Company Representative's Signature

The insurance quote must be complete, listing current insurance premiums. At the discretion of the Commission, a copy of current insurance policies may be required. Do not provide a copy of insurance policies unless requested.

01/27/2010 13:18

(FAX)

P.001/002

DeWitt Insurance

www.DeWittAgency.com

5877 Hwy 21 South, P.O. Box 619

Rincon, Georgia 31326

Phone: (912) 826-5264, Fax: (912) 826-2771

FAX TRANSMITTAL

DATE: Jan. 27, 10
TO: Tappy
Fax: 843-842-5872
FROM: Chip McBride
E-mail: *CMcbride@DeWittAgency.com*

RE: Luke Stapleton

COMMENTS:

Thanks,
Chip McBride

THIS FAX CONSISTS OF 2 PAGES INCLUDING THE COVER PAGE.

Are you ready for 2008? Call DeWitt Insurance, your ONE source for Insurance.

- ✓ Home/Auto/Mobile Home/Boat
- ✓ Business/Bonds/Builders Risk/Workers Comp
- ✓ Life/Individual Health/Group Health
- ✓ Mutual Funds/Annuities
- ✓ IRA's-Traditional/Simple/ROTH/Rollovers/SEP
- ✓ College Savings-Coverdell ROTH/UGMA/529

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DeWitt Insurance Management



Cornhusker Casualty Company
A Berkshire Hathaway Homestate Company

Quote

1725 Windward Concourse, Suite 200
Alpharetta, GA 30005

Agency: CC6358-STRINGER WARE CO
Producer: AVA EDMONDSON

Underwriter: Sam Tucker
Underwriter Phone #: 877.212.3816 Extension 353
Underwriter Email: stucker@bhhc.com
Underwriter Fax #: 770.410.3660

JAS
Applicant: LUKE H STAPLETON DBA ~~THE~~ DUKES
~~SEELY~~ Town Car Service LLC

Quote ID: 25678

Quote Date: 09-04-2009

Effective Date: 09-02-2009

Expiration Date: 09-02-2010

Commercial Automobile Coverage

Coverage Form: Business Auto

| Coverages | Covered Autos | Limit | Deductible | Premium |
|--------------------------------------|---------------|--------------|--------------|----------------|
| Liability | 7 | 1,000,000 | | \$2,517 |
| SC UM | 7 | 1,000,000 | | \$257 |
| SC UIM | 7 | 1,000,000 | | \$93 |
| Comprehensive | 7 | Per Schedule | Per Schedule | \$262 |
| Collision | 7 | Per Schedule | Per Schedule | \$452 |
| Total Commercial Auto Premium | | | | \$3,581 |

Comments:

Exhibit FWALukia H Stapleton

Name of Applicant

1. Are there currently any outstanding judgments against the Applicant?

☐ Yes ☒ No

If Yes, indicate nature of judgement(s) against applicant.

2. Is Applicant familiar with all statutes and regulations, including safety regulations and governing for-hire motor carrier operations in South South Carolina, and does Applicant agree to operate in compliance with these statutes and regulations?

☒ Yes ☐ No

3. Is Applicant aware of the Commission's insurance requirements and the insurance premium costs associated therewith?

☒ Yes ☐ No

Exhibit on Driver Qualifications

1. Applicant understands that all drivers must be a minimum of 18 years of age.

☒ Yes

☐ No

2. Applicant understands that a certified copy of the driver's three (3) year driving record issued by the SC DMV and such record from the DMV of the state in which the driver is or has been domiciled for such period must be maintained in the Applicant's business office.

☒ Yes

☐ No

3. Applicant understands that a criminal history background check from the state where the driver currently lives must be maintained in the Applicant's business office.

☒ Yes

☐ No

4. Applicant understands that all drivers operating a vehicle under a Class C Charter Certificate must have in their possession when operating a charter vehicle, a valid driver's license issued by the SC DMV or the current state of residence of the driver.

☒ Yes

☐ No

5. Applicant understands that all Class C Charter Certificate holders are prohibited from employing or leasing vehicles to drivers who are registered, or required to be registered, as sex offenders with the South Carolina State Law Enforcement Division or any national registry of sex offenders.

☒ Yes

☐ No

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA
POST OFFICE DRAWER 11649
COLUMBIA, SOUTH CAROLINA 29211

Applicant is familiar with the provision of S.C. Code Ann. §58-23-10, et seq.(1976), and amendments thereto, and R.103-100 through R.103-241 of the Commission's Rules and Regulations for Motor Carriers (Vol.26, S.C. Code Ann., 1976), and R.38-400 through 38-503 of the Department of Public Safety's Rules and Regulations for Motor Carriers (Vol.23A, S.C. Code Ann.,1976) and amendments thereto, and hereby promises compliance therewith.

STATE OF SOUTH CAROLINA)

COUNTY OF Beaufort)

Rob H Stapleton

Applicant's Signature

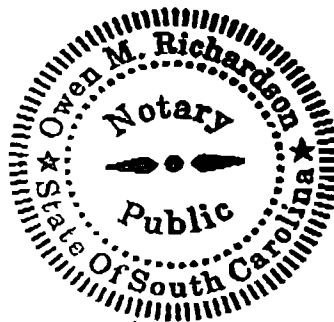
I, Luke H Stapleton, Owner / President
Name of Applicant's Representative Title

of ^{ANS} Duke Town Car Service,
Applicant

the Applicant for the Certificate of Public Convenience and Necessity as set forth in the foregoing, swear or affirm that all statements contained in the above application are true and correct.

Luke H Stapleton
Signature of Applicant's Representative

SWORN TO BEFORE ME
This 25 day of January, 2010
[Signature]
Notary Public
My Commission Expires
Commission Expires March 4, 2014



2/12/10

To the Public Service Commission & Office of Regulatory Staff

I respectfully request that the commission consider expeditious treatment of this application

I applied for LLC status with the State of Caroline expecting to receive "Certificate of Existence" by regular mail. A Follow up with the Office of Secretary indicated certificate was sent to a wrong E mail address and not received by date January. My subsequent error was in having two names for the company "The Duke's Town Car Service" and "Dukes Town Car Service". I have corrected the regulatory staff application to read "Dukes Town Car Service".

Thanks for your attention
Ruke Stapleton dba
Dukes Town Car Service

PS - I had hoped to begin operations
March 1, 2010